

State of Georgia Campaign Contribution Disclosure Report

1. Check One:

☒ **Original Report**

OR

☐ **Amendment**
(Please indicate Reporting Period and Year of Original)

2. Filing is being made on behalf of:

☐ Candidate or Public Official
(Office sought or held):

COMMISSIONER, District 3, Richmond County
[Include county, municipality, district, post or judicial circuit (ie. House District 113)]

OR

☐ Report of Organization or Person Other than Candidate's Campaign Committee

Filing office use
Only

BD OF ELECTIONS
JUN 30 '05
RICHMOND CO., GA

Use Earlier of Post
Mark or Hand
Delivered Date

3. Identifying and Contact Information

(1) BARBARA SIMS

Full Name of Candidate or Non-Candidate Campaign Committee (PAC., Corporation, etc)

(2) June 30, 05
Today's Date

(3) 10 Retreat Rd. Augusta, Richmond, GA.
Mailing Address City County State

30909
Zip Code

(4) 706.733-1410 and / or 706.739-0807
Contact Phone Number (We will understand the release of this information as permission to call your office if necessary.)

(5) If a Candidate or Public Officer, is there campaign committee (one or more persons) to make campaign transactions, keep the financial records of the campaign, or file the reports? Y or N (6) If so, is the Committee registered with the Secretary of State? Y or N

(7) If so, complete the following:

JOHN W. LEE, TRCAS.
Name of Chairperson and / or Treasurer of said committee

4. Period for which you are Reporting

You Must Check Only One box

My Non Election Year	My Election Year	Run-Offs (Report Required Only if you are in a Run Off Election)	Special Elections (Report Required Only if you are in a Special Election)
<input type="checkbox"/> June 30, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year) <ul style="list-style-type: none"> Persons elected to office in each year following the year in which the election occurs Persons leaving office with excess funds until such funds are expended as provided in the Act Unsuccessful candidates with excess funds, or who receive contributions to retire debt incurred, until such funds are expended, or such unpaid debts are satisfied (December 31 filing only) 	<input type="checkbox"/> March 31, ____ (year) <input checked="" type="checkbox"/> June 30, <u>2005</u> (year) <input type="checkbox"/> September 30, ____ (year) <input type="checkbox"/> October 25, ____ (year) <input type="checkbox"/> December 31, ____ (year)	<input type="checkbox"/> 6 days before Primary Run-Off, ____ (year) <input type="checkbox"/> 6 days before General Run-Off, ____ (year) <input type="checkbox"/> 6 days before Special Primary Run-Off, ____ (year) <input type="checkbox"/> 6 days before Special Run-Off, ____ (year)	<input type="checkbox"/> 15 days before Special Primary, ____ (year) <input type="checkbox"/> 15 days before Special, ____ (year) <input type="checkbox"/> Dec. 31, ____ (year)

Verification by Oath or Affirmation

State of Georgia County of Richmond
I, Barbara Sims, being duly sworn (affirm), depose and say that the information in this report form is complete, true, and correct. Further, I affirm that the contents in this report are the same as the contents in the electronic filing submitted, if also electronically filed.

Sworn to and subscribed before me on

June 30, 2005
[Signature]
Notary Public

My Commission expires

3/3

a. Signature of Candidate or b. Organization/Chairperson/Treasurer

PENALTIES: Any person who knowingly fails to comply with or who knowingly violates any of the provisions of the Ethics in Government Act shall be guilty of a misdemeanor.

Do Not Forget to Notarize!!!

